

## Arizona State Historic Property Tax Program Annual Report

State Historic Preservation Office 1300 W. Washington St. Phoenix, AZ 85007

http://www.pr.state.az.us

Questions? Call (602) 542-4009 or Tel/TTY (602) 542-4174

## **INSTRUCTIONS:**

- 1. Complete ALL items on this form.
- 2. Submit two <u>current</u> photos of the house labeled with your name, the property address and the date taken.
- 3. All owners must sign the Affidavit of Ownership and Maintenance and have it notarized.
- 4. Return notarized form and photographs to the above address.

| PROPERTY ADDRESS  |                            |                              |
|---|----------------------------|------------------------------|
| CITY  | STATE                      | ZIP                          |
| HISTORIC DISTRICT (if applicable)   |                            |                              |
| OWNER(S)  |                            |                              |
| MAILING ADDRESS   |                            |                              |
| CITY  | STATE                      | ZIP                          |
| TELEPHONE NUMBER ()   |                            |                              |
| CURRENT USE OF PROPERTY   | Owner Occupied Residential | Owner/Rental Combination     |
| Rental Commercial Other   | er (Explain)               |                              |
| What maintenance or rehabilitation work have  Routine Maintenance/General Upkeep  Other Maintenance/Rehabilitation/Remaintenance/Rehabilitation/Remaintenance/Rehabilitation/Remaintenance/Rehabilitation/Remaintenance/Rehabilitation/Remaintenance/Rehabilitation/Remaintenance/Rehabilitation/Remaintenance/Rehabilitation/Remaintenance/Rehabilitation/Remaintenance/Rema | )                          |                              |
| AFFIDAVIT OF  I / WE hereby certify that I / WE,  Property Owner  AM/ARE the owner(s) of the above  |                            |                              |
| maintained said property in accordance with   | 1 1                        | ,                            |
| HISTORIC COMMERCIAL HISTORIC  |                            |                              |
| or OWNER/COMMERCIAL) Historic Propert   |                            | OK WINED OSE (OWNER, REIVINE |
| Property Owner Signature  |                            | Date                         |
| Co-owner Signature  |                            | Date                         |
| Co-owner Signature  |                            | Date                         |
| Notary Validation   |                            | Date                         |

FAILURE TO SUBMIT THIS HISTORIC PROPERTY TAX REPORT WILL RESULT IN DISQUALIFICATION FROM THIS PROGRAM AND AN INCREASE IN YOUR PROPERTY TAXES.